

# Vendor Registration Form

City of Albuquerque, Purchasing Division, DFA

## 1. Vendor Data

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

NM State Gross Receipts No: \_\_\_\_\_

Federal EIN No: \_\_\_\_\_

Email Address: \_\_\_\_\_

## 2. Action Requested:

- Add as New Vendor
- Renew Vendor Registration
- Change in Address

## 3. Minority Business ID: (optional)

- Black American
- Hispanic American
- Native American
- Asian-Pacific American
- Asian-Indian American
- Female / Other

## 4. For City Use Only

Vendor Number: \_\_\_\_\_

Entered by: \_\_\_\_\_

Date Entered: \_\_\_\_\_

Fee (Amount Paid): \_\_\_\_\_

Check Number: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

To register as a vendor with the City of Albuquerque, please submit this form, along with a check for \$35.00 made payable to "City of Albuquerque", to:

COA Purchasing  
Vendor Registration  
P.O. Box 1293  
Albuquerque, NM 87103